

St. Bartholomew's Hospital



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St. Bartholomew's Hospital Journal,

MARCH, 1900.

"Æquam memento rebus in arduis
Servare mentem."—*Horace*, Book ii, Ode iii.

IN the next page we lay before our readers the salient features of the reconstruction of the London University as decided by Statutory Commission. It will be seen at once that so far as our Medical School at St. Bartholomew's is concerned we face a most critical juncture, and one the importance of which can hardly be too seriously estimated. It behoves every one connected with the School in any of its branches, and all who are interested in its future, to give their careful attention to the facts we have set forth, for upon our present attitude towards the reconstruction scheme depends not only our existence as a definite unit of complete medical education, but our influence as a centre of tuition of medicine, surgery, and midwifery.

The principle of "concentrating" the preliminary subjects of medical education at two or three centres is doubtless fraught with great advantages for the smaller medical schools; and it was to these that the original recommendation of the Cowper Commission referred. But in the present scheme no notice has been taken of the efficiency of such a school as St. Bartholomew's for the teaching of these subjects, and we find ourselves dealt with in just as summary a manner as schools where this branch as well as all the other branches of medical tuition have an acknowledged struggle for existence. Nor has any attention been paid to the number of students annually graduating at the University, who have received their whole training at St. Bartholomew's.

From the wording of the Statutes it is evident that the only centres where "concentration" is to take place are University College, King's College, and the Royal College of Science.

Not only is it proposed to concentrate the subjects of physics, chemistry, and biology, but anatomy, physiology, pathology, bacteriology, pharmacology, and hygiene are also to be dissevered from their connection with medical tuition at the hospital schools. The danger of teaching anatomy and physiology without sufficient regard to the future requirements of the medical student during his clinical work is already great, but with the subjects entirely dissociated from hospital tuition and placed in the hands of teachers who may easily be quite ignorant of medicine, the danger becomes intensified. It is good to have certain men devoting themselves entirely to the study of pure physiology and pure anatomy, and these will work more conveniently away from hospitals than at them, but for the student who is primarily a student of medicine, and only a student of anatomy and physiology as a means to this end, the present system has manifest advantages. And if this be so of anatomy and physiology, how much more forcibly does the argument apply to pathology, bacteriology, and public health.

We draw attention in our article to various anomalies in the work of the Commissioners that seem to make one thing certain, that the position as it stands at present is quite

an untenable one for our School, however desirable it may be for smaller institutions. What, then, are the alternatives before us? It is open to lodge a petition before Her Majesty's Privy Council and advertise our grievance as in a court of law. If so formidable a proceeding as this seem undesirable, a full statement of the reasons why the present position offered to St. Bartholomew's is considered totally inadequate might be addressed to the Commissioners, to the Senate, and to the public, and a protest made against inclusion as a School of the University in the Faculty of Medicine only. Or, as a third alternative, it is open for us to accept the Commissioners' offer with the distinct understanding, properly formulated and laid before the Senate, that if the present position of the School be endangered at any future time by any of the proposals hinted, but not now enforced, for "concentration" at other centres, we retain the privilege of becoming an External School whenever desired. No other mode of action seems possible than one of these. Certainly it would seem absolutely necessary that, in the absence of any guarantee of our integrity as a complete School on the part of the present Statutes, we must ensure a guarantee ourselves. To this end we trust the wisdom of our School Committee, feeling quite confident that its members are fully alive to the gravity of the situation, and relying upon them to effectually safeguard our interests.

The University of London.

THE NEW STATUTES AND REGULATIONS.

THE Report of the Commissioners appointed under the University of London Act, 1898, with the Statutes and Regulations framed by them, are now published, and are open to the criticism of all who have been anxiously awaiting these documents.

Our readers will remember that in 1892 the Cowper Commission was appointed to consider the draft charter for the proposed Gresham University in London. In their report the Commissioners made a series of recommendations with respect to the reconstitution of the University of London, and advised the appointment of a Statutory Commission for that purpose. It is the work of this same Statutory Commission that now needs consideration. We propose to lay before our readers such results of the work as affect the medical student especially, and our School at St. Bartholomew's particularly. It will be readily seen from our extracts and the comments we feel called upon to make upon them, that, whatever view we take of the prospect before us, our School is to-day placed in a very critical position, and one to meet which requires all the care and forethought available. Any italics occurring in the extracts are our own, used to emphasise significant passages.

I. *The Report.*—This deals with the origin of the Com-

mission and its method of work. It also asserts that the Commissioners "have endeavoured to follow as closely as possible the recommendations" of the Cowper Commission for the Gresham University, though we shall have cause to show later that this endeavour, with regard to the teaching of medicine, has considerably failed of its purpose. Then follows a discussion of the vexed question of preliminary medical education, which occupies the major part of the Report, and which is of such fundamental importance that we shall abstract it at some length. Attention is first drawn to Sect. 80 of the Statutes, which reads as follows:

80. With a view to greater efficiency and economy the Senate may make arrangements with the Governing Bodies of any Schools of the University to provide common courses of instruction for matriculated Students in such Schools in one or more subjects by Appointed or Recognised Teachers and to enable such Schools to interchange their matriculated Students for the purpose of instruction and in particular the Senate shall use its best endeavours whenever practicable to secure such common courses of instruction for Internal Medical Students in the preliminary and intermediate portion of their studies under Appointed or Recognised Teachers at one or more centres.

This Statute, the Commissioners state, is the result of the following considerations:

Before commencing his strictly professional studies in the wards of a hospital the student of Medicine is required to have studied, and in most cases to have passed an examination in certain introductory sciences, namely, physics, chemistry, general biology, anatomy, and physiology. These are sciences which cannot be adequately studied without practical instruction in a laboratory, dissecting-room, or museum. At the present time each of the Metropolitan Medical Schools, besides supplying professional instruction in the wards of its hospitals, affords more or less complete teaching in each of the above sciences; and this practice has prevailed for many years.

In the second part of their Report (p. xlii) the Gresham Commissioners made the following recommendation:—"It is very desirable that with regard at least to the smaller medical schools the teaching of physics, chemistry, biology, anatomy, physiology, pharmacology, and materia medica, pathology, hygiene and public health, and forensic medicine, should be concentrated into one or two institutions. At some of the medical schools the number of students attending these several classes is very small, and there is often great difficulty in obtaining teachers properly qualified for the work. As a rule the best men are not anxious to accept these appointments. There is little or no remuneration or encouragement to exertion. But if the several classes in these subjects could be fused together, the individual classes so resulting would be of sufficient magnitude and importance to secure the services of the best teachers. It can hardly be doubted that considerable improvement in medical education would result from this arrangement, while, by the saving of time and expense and concentration of force, the several schools would be set free from what must now be a burdensome weight, and would be enabled to devote all their energies to the teaching of the clinical subjects of medicine and surgery, which in all their various branches have largely developed of late years. If such a plan as this were adopted, the further question would be considered whether each of the several subjects should not be entrusted to more than a single teacher. The classes would probably be large enough and the remuneration sufficient to admit of this division of labour."

We have received from various quarters expressions of opinion, on the one hand opposed to, and on the other hand in favour of, this recommendation of the Gresham Commissioners.

In support of making no change in the existing practice the following arguments have been used. It has been urged that the teaching of these sciences ought to be conducted with the object of preparing the student for his later professional studies, and not of educating him for a scientific career. So long as these studies are closely attached to a hospital, and are carried on under the immediate direction of teachers in charge of more strictly professional studies, there is no danger of this object being disregarded. But such a danger would arise if these introductory studies were carried on in an independent centre, free from hospital control. Further,

in every Medical School great benefits result from continuous personal intercourse between teachers and students, and from the establishment of an *esprit de corps*. These benefits would be greatly diminished if the student did not join a hospital until after a considerable portion of his studies had been completed, and if his connection therewith were thus proportionately shortened.

The advocates of concentrating the teaching of these introductory sciences are numerous, and prominent among them are many of those younger members of the several hospital staffs who bear the greater part of the burden of medical tuition. They point out, in the first place, that the adequate teaching of the sciences in question entails heavy expenses, especially for the provision of properly equipped laboratories and other accommodation. The provision thus demanded becomes every year more elaborate and the outlay greater. A system of concentration would, they contend, obviously furnish at the same expenditure far better accommodation than is afforded by the present system. *At no one School, as a matter of fact, is the accommodation wholly adequate in respect of the sciences in question, and in many Schools it falls very far short of this standard.* In the case of some of the smaller Schools, the number of students needing instruction in these sciences is so small that the fees paid by the students for the courses of study are insufficient to defray the expenses. The maintenance of the instruction thus becomes a heavy tax on the general resources of the School, and naturally tends to an undesirable economy of accommodation and equipment. Yet the total amount of money actually spent at the various Schools, if expended on a system of concentration, would probably provide accommodation and equipment leaving little to be desired. In this respect it must be borne in mind that the Provincial Schools of Medicine, supported as they are in many cases by generous endowments, representative of local sentiment, are in the completeness of their equipment rapidly outstripping the Medical Schools. If the latter are to maintain themselves against this competition, a much more liberal equipment than now obtains in any one of them will have to be secured.

It is urged, in the second place, *that the sciences in question are not, and indeed cannot be, taught at the present day, as they were formerly, by men looking forward to the pursuit of a medical career.* They are now taught, and must perhaps to a still greater extent in the future be taught, by men who propose to devote themselves to a career in the sciences which they teach. But owing to the multiplicity of posts under the present system the emoluments of each post are, in most cases at least, too small to support the holder of it. These posts are regarded as stepping-stones to other posts, or as mere adjuncts to other duties. The result is that the teachers of these sciences in the Medical Schools are called away when they rise to eminence, or, if they remain, bestow only a portion of their energy upon the Medical School to which they continue to belong. The teaching in the Medical Schools suffers under this system, more especially in all that relates to the encouragement of research. Moreover, the multiplicity of posts and the smallness of the emoluments leads, more particularly in the smaller Schools, to the undesirable practice of the same teacher attempting to teach two or more branches of knowledge which cannot advantageously be taught by the same person. This depreciation of teaching and this lack of opportunity for research form a real and pressing evil, far outweighing any danger that would be likely to arise from any diminution in the practical direction of these introductory studies. Indeed, it is maintained that such a danger is illusory, and that from a system of concentration in which the teaching was directed by eminent and experienced men better and more practical results might be expected than from the present system, under which the teaching is often entrusted to young men whose enthusiasm for their subject is apt to lead them to disregard all other interests.

In the third place, it has been urged that were the teaching of these introductory sciences concentrated at one or more centres the laboratories and appliances now used for them, and not only the laboratories but also some of the teaching power, might be used to supply another and a pressing need. The development of medical science in the present day requires that each properly equipped hospital should be provided with what are called clinical laboratories, in which elaborate microscopic, chemical, and other investigations may be carried on in close proximity with the wards. In this provision the Metropolitan Medical Schools are markedly falling behind the Schools, not only of the Continent and of the United States, but even of the English provinces. The concentration proposed would allow the laboratories now used for preliminary and intermediate studies to be employed as clinical laboratories; it would improve the teaching in those studies; and it would at the same

time tend to remove what is rapidly becoming a reproach to the Medical Schools in London.

Weighing these and other arguments which have been brought forward on one side or the other, we have come to the conclusion that some kind of concentration is desirable, and we should have preferred to have ourselves framed Statutes for at once effecting it. But we found from the representations made to us on behalf of the Medical Schools that there was not at present any such consensus of opinion in regard to the mode in which concentration should be carried out as would enable us to do so. In these circumstances such a step would involve the consideration of details which lie outside our province, and the adoption of a course of action which exceeds our powers. It must rest with the Senate of the reconstituted University to deal with the whole of this question, *and we have empowered and recommended the Senate to proceed as soon as may be in the desired direction.*

The sciences named by the Gresham Commissioners as those in which they thought concentration of teaching to be desirable may be divided into three or four groups:—(1) The science of physics, chemistry, and general biology, partaking as they do to some extent of the character of general education form one group, and are spoken of in the Statutes as "preliminary studies." (2) The sciences of anatomy and physiology, although they exist independently of the medical profession, are closely allied to that profession, and form a second group, spoken of in the Statutes as "intermediate studies." (3) A third group, which may to some extent be described as belonging to "intermediate studies," is supplied by the sciences of pathology, that is to say, general pathology including certain departments of bacteriology, and pharmacology. These sciences resemble those of the two former groups in so far as the study of them on the one hand requires adequate laboratory accommodation, and on the other hand can be pursued apart from a hospital; but they are of a more strictly professional character. (4) The science of hygiene and all studies relating to public health may be regarded as a fourth group, which would, perhaps, best be described as ancillary rather than as introductory to medical studies. In some respects this group forms an independent branch of study, and ought to be so treated.

The advantages of concentration are greater and the difficulties and disadvantages less in the first group than in the second, and in the second than in the third. Indeed, the arguments in favour of concentration in the case of the first and second groups of studies are so strong that we feel very confident that the Senate will be able at no distant date to give effect to our recommendations in regard to one or both of these groups. In recognising teachers of the University we have accordingly thought it expedient to place the teachers of these two groups of subjects at Medical Schools in a separate list. We have recognised them only "provisionally," in the desire to facilitate the work of the Senate in carrying out a scheme of concentration.

In so doing, however, our sole object is to give emphasis to our opinion that concentration in these groups ought to be effected without delay; and it is not to be inferred that in our judgment concentration in the other groups is undesirable or impracticable.

II. The Statutes.—These set forth the purposes and constitution of the University. In Sect. 12, dealing with the formation of the Senate, we note that the Hospital Schools, other than University College and King's College, have no direct representation, but only a possible representation of three in all through the Faculty of Medicine. University College and King's College each sends two representatives.

Sect. 28 provides for three Standing Committees of the Senate:

1. The Academic Council.
2. The Council for External Students.
3. The Board to promote the Extension of University Teaching.

The functions of these Standing Committees shall be advisory.

The admission in whole or part of duly qualified institutions, or Schools of the University, and the assignment of

funds in such Schools, are among the powers vested in the Academic Council. Another matter assigned to the same body is the equalisation, as far as possible, of the standards of knowledge and attainments presented for the degrees conferred upon Internal and External Students respectively.

In the Statute dealing with "Faculties and Members of Faculties," Sect. 61 reads:

61. In admitting Teachers to be members of Faculties the Senate shall take care that as far as possible all sections of Teachers are represented.

The Statute dealing with "Schools and Teachers of the University" naturally interests us most. We abstract—

70. The Schools of the University shall be:

(i) The public educational institutions hereinafter named as the first Schools of the University;

(ii) Such public educational institutions situate within the administrative County of London including the County of the City of London as the Senate shall from time to time admit either in whole or in part as Schools of the University.

71. The following persons shall be Teachers of the University (that is to say):

(i) The Professors Assistant-Professors Readers and Lecturers of the University appointed as Officers of the University by the Senate (herein called "Appointed Teachers");

(ii) Such members of the teaching staffs of public educational institutions within the appointed radius whether Schools of the University or not as on the day fixed for the coming into force of these Statutes shall have been recognised as Teachers of the University by the Commissioners or shall thereafter be so recognised by the Senate (herein called "Recognised Teachers").

72. The Senate may admit a department or branch of any institution aforesaid as a School of the University without admitting the whole of the institution.

73. In deciding on the claim of an institution to be admitted in whole or in part as a School of the University in which courses of instruction may be pursued by Internal Students the Senate shall have regard to the matters following viz. (a) the general character and financial position of the institution (b) the adequacy in number and qualifications of the teaching staff (c) the University standard of the teaching (d) the adequate provision of laboratories and other appliances necessary for giving instruction in the subjects in respect of which the institution seeks to be admitted (e) the conditions as to age and attainments on which students are admitted (f) the number of students proceeding or likely to proceed to degrees in the University (g) the relation of the institution to any other University.

75. If the Senate shall decline to admit an institution or department or branch of an institution as a School of the University the institution in question may appeal to the Visitor against the decision of the Senate.

76. All Schools of the University shall be open to the visitation of the University and for that purpose the Senate shall make arrangements for obtaining reports at prescribed intervals of time on the efficiency thereof. A copy of the report on any School of the University shall be forwarded to the Governing Body of that School with such remarks thereon as the Senate may think fit to make. Provided always that the Senate shall have no power of interference with the course of study of any students therein other than Internal Students.

79. The Senate with the consent of the Governing Body may nominate any teachers in a School of the University to be Appointed Teachers either temporarily or permanently and subject to any prescribed conditions may allocate funds for the erection or extension of buildings or the remuneration of Appointed or Recognised Teachers or the provision or improvement of the equipment in a School of the University as a place of instruction or research and may provide generally for its assistance or benefit.

Sect. 80 we have already quoted under the 'Report.'

82. The following shall be the first Schools of the University (that is to say):—

In all the Faculties in which they respectively afford instruction—
University College, London.
King's College, London.

In the Faculty of Medicine—

The Medical School of Saint Bartholomew's Hospital, and the nine other London Medical Schools.

86. Appointed Teachers shall lecture or teach in such places as may be from time to time determined by the Senate.

88. In appointing or recognising a Teacher of the University the Senate shall specify the subject that is to say the branch or branches of knowledge for which he is appointed or recognised, and shall take care that no Teacher is appointed or recognised for two or more branches of knowledge unless those branches are of such a kind that in the opinion of the Senate instruction in them of a University standard can with advantage be given by the same person.

93. The Senate shall take care that only such persons are recognised as Teachers of the University as being duly appointed members of the teaching staff of a public educational institution are regularly engaged in giving at the institution to which they belong adequate courses of instruction of a University standard and are provided with such laboratory accommodation apparatus and other appliances as may be necessary for the instruction which they give.

The Statute concerning "Degrees" contains the following:

110. Internal Students and External Students alike shall be eligible for all the above degrees but in Medicine and Surgery no Students shall be admitted to the examinations for a degree who have not gone through the prescribed course of study in a Medical School of the University or a medical institution or school in the United Kingdom or any Dependency of the British Crown or in foreign parts recognised by the Senate with the approval of Her Majesty in Council as an institution or school whose students may be admitted as candidates for a degree.

The Statute referring to "Examinations" contains the following:

123. The Senate may make arrangements with the Royal College of Physicians of London and the Royal College of Surgeons of England or either of them to conduct jointly with the Senate examinations in such portions of the subjects included in the course of study for a medical degree as may be agreed upon between the Senate and those Colleges or either of them and may also make similar arrangements with other corporations and institutions holding professional examinations in subjects included in other courses of study.

Under the heading "Definition of Terms" we read that—

"Internal Students" of the University mean Students who have matriculated at the University and are pursuing a course of study approved by the University in a School or Schools or under one or more of the Teachers of the University.

"External Students" mean all other matriculated Students.

III. *The Regulations.*—These are provisions recommended by the Commissioners for the carrying out of the Statutes. They are open to repeal or alteration by the Senate. They first define the various Boards of Studies.

Those connected with Medicine are—

A Board of Preliminary Medical Studies.

A Board of Intermediate Medical Studies.

A Board of Advanced Medical Studies.

A Board of Dentistry.

A Board of Pharmacy.

A Board of Hygiene and Public Health.

A Board of Physiology and Experimental Psychology.

They then proceed to the selection of a list of "recognised Teachers of the University for the several subjects specified." At University College and King's College, besides the Faculties of Arts, Laws, Medicine, and Engineering, the Faculty of Science has its full complement of teachers recognised. At the various other Medical

Schools, however, the teachers of science subjects are omitted. The list at the Medical School of St. Bartholomew's Hospital is as follows. (In this and the following list we omit qualifications in order to save space):

Andrewes, Frederick William (*)	Pathology and Bacteriology.
Bowlby, Anthony	Surgery and Laryngology.
Bruce Clarke, William	Surgery.
Brunton, Sir Thomas Lauder	Medicine.
Butlin, Henry Trentham	Surgery.
Calvert, James	Materia Medica.
Champneys, Francis Henry	Midwifery.
Church, William Selby	Medicine.
Cripps, William Harrison	Surgery and Dermatology.
Cumberbatch, Alphonso Elkin (†)	Aural Surgery.
Duckworth, Sir Dyce	Medicine.
Gee, Samuel Jones	Medicine.
Griffith, Walter Spencer Anderson	Midwifery.
Hensley, Philip John	Medicine.
Herringham, Wilmot Parker	Medicine.
Jessop, Walter Hamilton Hylton	Ophthalmology.
Langton, John	Surgery.
Lockwood, Charles Barrett.	Surgery.
Marsh, Howard	Surgery.
Moore, Norman	Medicine.
Ormerod, Joseph Arderne (†)	Medicine.
Paterson, William Bromfield	Dental Surgery.
Power, D'Arcy	Surgery.
Shaw, Thomas Claye	Mental Diseases.
Tooth, Howard Henry (†)	Medicine.
Vernon, Bowater John	Ophthalmology.
Walsham, William Johnson	Surgery.
West, Samuel (*)	Medicine.
Willett, Alfred	Surgery.

Also at:—

(*) The London School of Medicine for Women.

(†) The Hospital for the Paralysed and Epileptic.

As incidental errors we notice Mr. Cripps entered as teacher of Dermatology (a post vacated by him some six years ago), whereas Sir Thomas Lauder Brunton's lectureship in Materia Medica, Pharmacology, and Therapeutics, and Dr. Hensley's lectureship in Medical Jurisprudence, are omitted altogether.

A strange anomaly is the reference to the members of the Staff of Great Ormond Street Hospital as teachers of "Diseases of Children," whilst their neighbours at Queen Square are referred to as teachers of "Medicine," as also are the physicians on the Staff of Brompton Chest Hospital.

Sect. IV of the Regulations allows that—

The following members of the teaching staffs of public educational institutions within the appointed radius shall severally be *provisionally recognised* as a Teacher of the University for the subject specified until such time as the Senate may make arrangements to secure common courses of instruction for Internal Medical Students in such subject at one or more centres.

This, of course, refers to the "concentration" scheme. At University College and at King's College only the Anatomy and Physiology professors are given this "provisional recognition," the professors of Chemistry, Physics, Botany, and Zoology having, as we saw above, been included in the list of "recognised Teachers." At our own School, however, *all* the subjects of preliminary medical education are included in the "provisional recognition" list:

Bruce Clarke, William	Anatomy.
Chattaway, Frederick Daniel	Chemistry.
Edkins, John Sydney	Physiology.

Klein, Edward Emanuel	Physiology.
Lockwood, Charles Barrett	Anatomy.
Shore, Thomas William	Biology.
Womack, Frederick	Physics.

Lastly, Sec. 5 gives a list of the "members of the respective faculties." But in the faculty of science, though the names of the University College and King's College teachers of Chemistry, Biology, and Physics occur, we look in vain for those of our own lecturers in these subjects.

From a consideration of the above points it is quite obvious that our Medical School at St. Bartholomew's stands in a very unsatisfactory position with regard to the new Statutes and Regulations, and, which is more important, that it is capable of being thrust into a still more unsatisfactory position in the future. The following comments are merely outlined objections to some of the results of the scheme from our own point of view:

1. The Cowper Commission Report, when recommending some form of concentration of the preliminary medical subjects, spoke of it as desirable "with regard, at least, to the smaller medical schools," where "the number of students attending the several classes is very small, and there is often great difficulty in obtaining teachers properly qualified for the work." Neither of these considerations apply to St. Bartholomew's, but in the Statutes and Regulations before us no distinction whatever is made between our own School, the largest in London, and the smallest and most struggling of the other Medical Schools.

2. Despite Sec. 73 of the Statutes, the Commissioners have taken no notice whatever of relative efficiency of the different institutions selected or schools of the University, nor of "the number of students proceeding to degrees in the University." In April of last year a representation was forwarded by our Medical Officers and Lecturers, through their Delegate, Dr. Shore, and the Warden, Dr. Calvert, giving a complete statement of our efficiency as a teaching Institution, and particulars of our successes at the London University examinations. This, however, the Commissioners have elected totally to ignore, and without inquiry they assert that "at no one school, as a matter of fact, is the accommodation wholly adequate in respect of the (introductory) sciences."

3. In their selection of "recognised teachers of the University" the Commissioners have entirely omitted the lecturers (often men of high repute) in preliminary subjects at the larger medical schools, whereas at University College and King's College teachers of less experience and repute are fully recognised.

4. University College and King's College are admitted as Schools of the University "in all the faculties in which they respectively afford instruction." The Medical School of St. Bartholomew's Hospital is admitted as a School of the University "in the Faculty of Medicine" only.

5. St. Bartholomew's is no longer to be recognised as a School of Science, but its teachers are "provisionally"

recognised in the preliminary scientific and medical subjects, —Chemistry, Physics, Biology, Anatomy, and Physiology, until such time as the Senate shall "concentrate" these subjects. This is quite irrespective of the large sums of money spent in equipping St. Bartholomew's for tuition in these subjects, and rendering the opportunities of teaching them at least equal to any in London. These considerations, as also those of efficiency of the lecturers in these subjects, as we said, have not influenced the Commissioners whatever.

6. The only possible institutions where these subjects can be "concentrated" are University College, King's College, and the Royal College of Science. And the Senate may provide funds for the fuller equipment of these Institutions at any time.

7. The ill-adjusted representation of the various institutions is well seen in the lists of members of the faculties. In the Faculty of Science, for instance, Dr. Klein and Dr. Waller (St. Bartholomew's and St. Mary's Medical Schools) have no place, whereas Dr. Halliburton and Dr. Starling (King's and University Colleges) are admitted. Other instances might be given. In the Faculty of Medicine Mr. Bowlby, Mr. Lockwood, and Mr. D'Arcy Power are not included, being Assistant Surgeons at St. Bartholomew's; but their late pupils at small hospitals, like the Royal Free, are. Neither Mr. Vernon nor Mr. Jessop attains the distinction; nor does Dr. Ormerod, Dr. Herringham, or Dr. Tooth. Dr. West, our Demonstrator of Practical Medicine and Assistant Physician, is not a member of the Faculty on those merits, but as Physician to the Royal Free Hospital he is. We could name a small hospital whose entry last year was fifteen students, to which we have ourselves recently sent a Midwifery Assistant and a House Surgeon, that is almost as fully represented, in point of numbers, as we are. Such a school obviously has nothing to lose but much to gain from the reconstruction scheme.

How Disease is spread in China.

By J. PRESTON MAXWELL, M.B., F.R.C.S.
(With an Illustration.)

NO. I.—THE BARBER.

IT is my purpose to bring before you in the few following papers the principal means which combine to make China a perfect paradise for infectious and contagious disease. And in this paper, the first of a series which I hope to write, we meet a man whose occupation enables him to produce the striking result, that one *hardly ever meets* a man in this country who does not bear the scars and traces of ringworm, even if the disease itself is not present.

I fear it is not from this cause, however, that the barber

is one of the most despised of mortals in the great central kingdom round which (by its inhabitants) the world is supposed to revolve. Despised, did I say? I might almost use a stronger word, for to the third generation no child of his can hold public office.

Let us now take his measure. He may be a boy of eleven or twelve, or a full-grown man. In the former case he will probably tramp about with his stock-in-trade, while in the latter he will open a shop on a main street. Here he works in full view of the passers by, who can stop at their pleasure and converse with either employer or employé. But whether he plies his trade as an itinerant or a shop-keeper his implements and accessories are ever alike, so that a double description is unnecessary.

Looking at our illustration, we see an itinerant barber, aged about sixteen, plying his trade in the Changpoo Hospital, his victim being a patient of my own. To the left is seen the barber's stand, with a wooden basin containing dirty water, a shelf below it for cloths, also far from clean, and attached to the upright some of the thread which is woven into the pigtail to set it off, and give it a more stylish effect. The other article of furniture is shaped like a large wedge, set up on its broad end, and containing four drawers diminishing in size as we mount upwards. At the top the edge is flattened out into a narrow seat, on which the person to be shaved sits. In these drawers are the instruments he uses.

Firstly, there are two combs, one used for the rough work of smoothing out the pigtail, and the other used for the fine finishing touches. Neither of these is ever washed, and my friend in the picture acknowledged without hesitation that there were five years' remnants in the interstices.

Secondly, there are four razors. Two are large and triangular, one used for the rough work, and one for the final shave. These are kept well sharpened, and the shaving is excellent, quite up to the best English standard. Then there are two small narrow ones, with long blades, one for shaving the interior of the nostril, and the other for performing the same office for the external ear.

Thirdly, there are a scoop, a fine feather brush, and a short wire with a small smooth knob at the end of it. The first-named is used for removing wax from the ears; the second, revolved rapidly between the fingers, serves to brush out the same cavity; while the third, placed parallel to the palpebral fissure, with the knob on the inner canthus, is twirled rapidly, the object being to set up a subacute conjunctivitis, which is supposed by the Chinese to improve the appearance of the eye, and is specially done before a feast.

Soap is never used. With a brush like that used in England for cleaning silver, or a dirty cloth, water is dabbed all over the part to be shaved, and the razor is immediately applied. So dexterous are they that I have never seen a head cut while shaving was proceeding. This brush and



recognised in the preliminary scientific and medical subjects, —Chemistry, Physics, Biology, Anatomy, and Physiology, until such time as the Senate shall "concentrate" these subjects. This is quite irrespective of the large sums of money spent in equipping St. Bartholomew's for tuition in these subjects, and rendering the opportunities of teaching them at least equal to any in London. These considerations, as also those of efficiency of the lecturers in these subjects, as we said, have not influenced the Commissioners what ever.

6. The only possible institutions where these subjects can be "concentrated" are University College, King's College, and the Royal College of Science. And the Senate may provide funds for the fuller equipment of these Institutions at any time.

7. The ill-adjusted representation of the various professions is well seen in the lists of members of the Faculties. In the Faculty of Science, for instance, Dr. Klein and Dr. Waller (St. Bartholomew's and St. Mary's Medical Schools) have no place, whereas Dr. Halliburton and Dr. Starling (King's and University College) are admitted. Other instances might be given. In the Faculty of Medicine Mr. Bowlby, Mr. Lockwood, and Mr. D'Arcy Power are not included, being Assistant Surgeons at St. Bartholomew's; but their late pupils at small hospitals, like the Royal Free, are. Neither Mr. Vernon nor Mr. Jessop attains the distinction; nor does Dr. Ormerod, Dr. Herringham, or Dr. Tooth. Dr. West, our Demonstrator of Practical Medicine and Assistant Physician, is not a member of the Faculty on those merits, but as Physician to the Royal Free Hospital he is. We could name a small hospital whose entry last year was fifteen students, to which we have ourselves recently sent a Midwifery Assistant and a House Surgeon, that is almost as fully represented, in point of numbers, as we are. Such a school obviously has nothing to lose but much to gain from the reconstruction scheme.

How Disease is spread in China.

By J. PRESTON MAXWELL, M.B., F.R.C.S.
(With an Illustration.)

NO. I.—THE BARBER.

IT is my purpose to bring before you in the following papers the principal means which combine to make China a perfect paradise for infectious and contagious disease. And in this paper, the first of a series which I hope to write, we meet a man whose occupation enables him to produce the striking result that one *hardly ever meets* a man in this country who does not bear the scars and traces of ringworm, even if the disease itself is not present.

I fear it is not from this cause, however, that the barber

is one of the most despised of mortals in the great central kingdom round which (by its inhabitants) the world is supposed to revolve. Despised, did I say? I might almost use a stronger word, for to the third generation no child of his can hold public office.

Let us now take his measure. He may be a boy of eleven or twelve, or a full-grown man. In the former case, he will probably tramp about with his stock-in-trade, while in the latter he will open a shop on a main street. Here he works in full view of the passers-by, who can stop at their pleasure and converse with either employer or employee. But whether he place his trade as an itinerant or a shop-keeper his implements and accessories are ever alike, — that a double description is unnecessary.

Looking at our illustration, we see an itinerant barber, aged about sixteen, plying his trade in the Changpo Hospital, his victim being a patient of my own. To the left is seen his barbers' stand, with a wooden basin containing fine water, a shelf below it for cloths, also far from clean, and attached to the upright some of the three wheels which are used into the pigtail to set it off, and give it some "back effect." The other article of furniture is shaped like a large wedge, set up on its broad end, and containing four drawers the width being in size as we mount upwards.

The top drawer is flattened out into a narrow seat, on which the person to be shaved sits. In these drawers are the barber's tools.

Firstly, there are two combs, one used for the rough work of separating out the pigtail, and the other used for the fine finishing touches. Neither of these is ever washed, and my friend on the picture acknowledged without hesitation that these were five years' remnants in the interior.

Secondly, there are four razors. Two are large and triangular, one used for the rough work, and one for the final shave. These are kept well sharpened, and the shaving is excellent, quite up to the best English standard. Then there are two small narrow ones, with long blades, one for shaving the interior of the nostril, and the other performing the same office for the external ear.

Thirdly, there are a scoop, a fine feather brush, and a small stick with a small smooth knob at the end of it. The first is used for removing wax from the ears, the second is used rapidly between the fingers, screwing round and round the same cavity; while the third, placed parallel to the patient's face, with the knob on the inner canthus, is turned rapidly, the object being to set up a slight congestion, which is supposed by the Chinese to improve the appearance of the eye, and is specially done before a feast.

Fourth is soap, used. With a brush like that mentioned for cleaning silver, or a dirty cloth, water is dabbed all over the part to be shaved, and the razor is immediately applied. So thorough are they that I have never seen a head cut while shaving was proceeding. This brush



"THE BARBER."

To Illustrate Mr. Maxwell's Article.

cloth are never cleaned, but are used from customer to customer till they are high worn out.

The foregoing description will enable my readers to graphically conceive what happens. A boy with his head covered with favus or tinea tonsurans comes along, and the cloth and razors are used on his head; the next customer is treated in the same manner, with the same cloth and razors, and so on *ad infinitum*.

Is it wonderful that the vast majority of the population suffer from ringworm? A secondary consequence is that many in China are prematurely bald. I have often seen children with only a thin coating of hair on their heads, five sixths of the hair bulbs having been destroyed in the course of the disease, and medicine "to make the hair grow" is in frequent demand.

And what of the damage done by the reckless use of eye and ear instruments? As to the eye, the conjunctivitis may pass into a purulent ophthalmia, and this into a chronic conjunctivitis and keratitis, most difficult to treat satisfactorily, and leaving behind it a permanently impaired vision. As to the ear, furuncles, impetigo and eczema are not uncommon, whilst among the greater evils perforation is a common event. And yet, for some unexplained cause, middle-ear suppuration is by no means common.

Such is a short account of the mischief caused by the barber. In my next paper I hope to deal with the doings of the common agriculturist.

A word or two about the illustration may not be amiss. While out fishing one day the patient was bitten by a poisonous snake; he suffered from drowsiness and general cedema, which came on shortly after the bite, and lasted some forty-eight hours, the boy being intensely ill. Then the skin of the forearm sloughed (he was bitten on the wrist), and when he came under my care a month after the event the hand was gangrenous and full of maggots, the whole of the skin from just above the elbow downwards was gone except for a very small strip on the anterior surface of the forearm, and the patient was in a septic condition. Amputation was performed through the middle of the arm, and the patient made a good recovery.

"The Doctor" of Fiction.

By L. R. TOSWILL.

FICTA voluptatis causa sit proxima veris—"Few men have imagination enough for the truth of reality." So says Goëthe, and it certainly would seem to be the case where medical men are described in fiction. In the first place, the number of medical men who pose as heroes is very small; this is probably due mainly to the fact that it is almost impossible for

a layman to really understand, and so to tell, the story of a doctor's life. On the other hand, few of the profession have time for writing outside their own work. Secondly, we must consider the doctor as a subordinate character. Until comparatively lately authors have seemed rather to avoid the medical faculty, possibly because they were afraid of committing themselves, but more probably because they did not consider the doctor sufficiently interesting as a class. Whilst bravery was represented by the soldier, adventure by the sailor, piety by the cleric, secrecy by the law, etc., hard work, as represented by the doctor, found no place in the realms of fancy and romance. His was a nature far too real and sordid to please the gentle reader. But now, in these days of so-called universal education, the doctor is a convenient peg on which an author with a smattering of science can hang his most extravagant ideas; he is, in fact, the scapegoat of scientific sins. To invent new and original adventures for the hero of the story is not always easy; but let him be a doctor, let him experiment (if possible) upon his fellow-creatures, lead up to a crime, and hey presto! we have run through two editions before we know where we are.

Perhaps one of the earliest appearances of the doctor in fiction is in Chaucer's *Canterbury Tales*, in which the "Doctour of Phisike" tells the story of Virginius:

Well knew he the old Esculapius,
And Deiscorides, and eke Rufus,
Old Hippocrates, Haly and Galien.

So we are told in the "Prologue."

Taking next those who occur in Shakespeare's works, there is Dr. Caius in "The Merry Wives of Windsor," who has a leading part, though he is not much more than a buffoon. Then there is Dr. Butts in "Henry VIII," who spies upon the Cardinal; but there are no others of any importance. There is a doctor in "Cymbeline" and "King Lear," and the starving apothecary who sells Romeo poison, and the doctor in "Macbeth," to whom Macbeth makes that memorable appeal, "Canst thou not minister to a mind diseased?" Then, in the early part of the seventeenth century, we meet Dr. Rezio in Cervantes' immortal book. Dr. Rezio was of Barataria, and forbade Sancho Panza to taste any of the good things set before him—"Roasted partridge was forbidden by Hippocrates, rabbits are a sharp-haired diet, veal is prejudicial to health; but the governor might eat a few wafers and a thin slice or two of quince." Nearly a hundred years after Gil Blas became the pupil of Dr. Sangrado, of Valladolid—a tall, solemn man, of whom it is said "his reasoning was geometrical and his opinions angular." He favoured a simple diet—water and boiled apples,—and informs us that it is a gross error to suppose that blood is necessary for life. After this original remark he solemnly took six porringers of blood from a patient on three successive days, and ordered him to drink three pints of warm water every two hours. The

patient died—"from obstinacy." In 1749 Fielding's greatest work—*Tom Jones*—appeared. In this he tells us of a learned surgeon who was called in to attend Mr. Jones after his accident. After the surgeon's examination of the patient, Jones's friend the lieutenant has the following instructive conversation with him. "I hope, sir," said the lieutenant, "the skull is not fractured." "Hum," cries the surgeon, "fractures are not always the most dangerous symptoms; contusions and lacerations are often attended with more fatal consequences than fractures. I had rather see a man's skull broken all to pieces than some contusions I have met with." He further remarks, "Symptoms are not always regular nor constant. I have known very unfavourable symptoms in the morning change to favourable ones at noon, and return to unfavourable again at night. Of wounds, indeed, it is rightly and truly said, *Nemo repente fuit turpissimus*. I was once, I remember, called to a patient who had received a violent contusion in his tibia, by which the exterior cutis was lacerated, so that there was a profuse sanguinary discharge; and the interior membranes were so divellicated, that the os or bone very plainly appeared through the aperture of the vulnus or wound. Some febrile symptoms intervening at the same time (for the pulse was exuberant and indicated much phlebotomy), I apprehended an immediate mortification; to prevent which I presently made a large orifice in the vein of the left arm, whence I drew twenty ounces of blood, which I expected to have found extremely sizy and glutinous, or, indeed, coagulated, as it is in pleuritic complaints; but to my surprise it appeared rosy and florid, and its consistency differed little from the blood of those in perfect health. I then applied a fomentation to the part, which highly answered the intention; and after three or four times' dressing, the wound began to discharge a thick pus or matter, by which means the cohesion— But perhaps I do not make myself perfectly well understood." This is an excellent example of what—in the words of a well-known lecturer—is known as "doctors' talk." Doubtless many surgeons have benefited by this extremely useful dissertation upon wounds! We must not forget either Dr. Diaforius in Molière's "Malade Imaginaire," who used to say that what was good enough for his ancestors was good enough for his posterity, and that he had no patience with the new fads about the rotundity of the earth, its motion round the sun, the circulation of the blood, and all such stuff. It will be noticed that so far the doctor's part has usually been that of a buffoon or laughing stock; he is generally as ignorant as he is pedantic,—

By nature madman, and by study fool,
Bavius turns doctor, and destroys by rule.

Turning next to the early part of the present century, we naturally think first of Dickens, by whom Ben Allen, Bob Sawyer, Jack Hopkins have been immortalised in *Pick-*

wick Papers. Let me just quote the description of Bob Sawyer: "Mr. Bob Sawyer—who was habited in a coarse blue coat, which, without being a great-coat or a surtout, partook of the nature and qualities of both—had about him that sort of slovenly smartness and swaggering gait which is peculiar to young gentlemen who smoke in the streets by day, shout and scream in the same by night, call waiters by their Christian names, and do various other acts and deeds of an equally facetious description." Although, of course, these characters, like all Dickens' characters, are caricatures, yet there was a groundwork of truth upon which the caricature was built; and it is to be feared that at this time the medical profession was not held in very high esteem by the general public. It was not so very long since it was written that—

The king employed three doctors daily—
Willis, Heberden, and Baillie;
All exceeding skilful men—
Baillie, Willis, Heberden;
But doubtful which most sure to kill is—
Baillie, Heberden, or Willis.

Dickens also describes a fashionable physician in *Dombey and Son*. This is Dr. Parker Peps, who calls every one by some title, to give the impression that all his patients are of high degree. Thackeray has very few doctors in his works. There is Dr. Firmin in *Philip*, Dr. Goodenough in *Pendennis*, and others in *Vanity Fair*, but none of very particular interest. About this time, too, Charles Reade wrote one of his books with a purpose—*Hard Cash*—against the abuse of their power by medical men, and the cruel use of lunatic asylums as convenient places for sending people who were in the way.

Valentine Vox, another novel with the same object, describes the imprisonment and ill-treatment of an old man, who has been placed in a private asylum that his relations may get at his money. A capital picture of a narrow-minded, conceited country doctor, Mr. Pilgrim, is given in *Scenes of Clerical Life* by George Eliot. Then, too, the navy surgeon is well described by Marryat in the person of Dr. O'Brien, and as an example of the apothecary-surgeon of the old days is Japhet in *Japhet in Search of a Father*. One of the best characters in *Treasure Island* is dry, tough old Dr. Livesay. Then, too, there is a wonderful study of the double personality in *Dr. Jekyll and Mr. Hyde*. But perhaps Stevenson's best description of a medical man is in *The Wrong Box*. This is Sir Faraday Bond, who had opinions both as to diet and as to clothes, thus: "Avoid tea, madam; avoid tea, fried liver, antimonial wine, and baker's bread. Retire nightly at 10.45, and clothe yourself (if you please) throughout in hygienic flannel. Externally the fur of the marten is indicated. Do not forget to procure a pair of health boots at Messrs. Dall and Crumbie's. I had forgotten one caution—avoid kippered sturgeon as you would the very devil!"

A good study of (it is to be hoped) a rare type is found in R. D. Blackmore's *Christowell*. Dr. Perperaps, whose profound ignorance is only equalled by his impudence, tries to impose upon his patients by using long words, but he generally succeeds in making himself ridiculous; his daughter "Spotty" is the practical partner of the firm. The hero of *The Sowers*, Prince Paul Alexis, learns medicine that he may attend the peasants on his huge estate in Russia. This he does, disguised as the "Moscow Doctor," in order to allay the suspicions of the Government. For one who has studied in a purely amateurish spirit, he is singularly successful in his treatment of the cholera and other terrible plagues, which seem to be continually sweeping over the White Empire. Merriman also, with one of his happy touches, describes in *With Edged Tools* a doctor on the West Coast of Africa, who takes "an almost too personal interest" in his patients.

A book which deals with that vexed question, anti-vaccination, is *Dr. Thorne*, by Rider Haggard. This is the story of a clever man, whose whole sympathies and reason protest against the anti-vaccination party, but who, falling on evil days, is induced, for the sake of money, to come forward as the champion of their cause. The horror he feels at being compelled to advocate a cause which he knows will probably cost thousands of lives reaches a climax when his only daughter dies of smallpox.

Of a very different kind is Ian Maclaren's *Doctor of the Old School*. Dr. Maclure is the idol of Drumtochty. No distance is too great, no weather is too bad for the old doctor and his pony Jess. They labour through the snow on their errand without a thought of turning back. Self-denying, tireless, and as devoted to his patients as they are to him, he is perhaps as noble a type as any that can be found. That his fees were not exorbitant may be judged from the following extract. Jamie Soutar, the Drumtochty cynic, is condoling with a miserly neighbour, who thinks he has been overcharged. "What, thirty shillings for twal' veesits, and him no mair than seven mile awa'! an' A'm telt there werena' mair than four at nicht! Ye'll ha'e the sympathy o' the glen, for a'budy kens yir as free wi' yir siller as yir tracts!"

Another well-known and essentially modern character is "Dr. Nikola." This book is the story of a man—half mesmerist and wholly mysterious—who penetrates in disguise into a monastery in China, where secrets are divulged which are supposed to be of profound importance. After witnessing some very extraordinary things, including the restoring to life (temporarily) of a man who has just died—electricity being the useful means by which this is done!—he manages to escape, but, unfortunately, has to retire into such close concealment that the world is no richer for his discoveries. The sequel of this book—*Dr. Nikola's Experiment*—is, of course, an experiment of the same sort by Dr. Nikola himself, which is not altogether success-

ful, some entirely unforeseen complications arising. It is unfortunate (but perhaps it is inevitable) that the description of the methods and apparatus is so vague in this sort of book.

Rudyard Kipling describes the adventures of an American doctor in *The Day's Work*. This doctor, by mistake, gives a very large dose of a strong emetic to a very powerful and drunken navvy, under the impression that he has just drunk a bottle of laudanum. The results are disastrous both to patient and doctor.

Lastly, there have lately been a succession of short stories, semi-detective in nature, in which a doctor plays a principal part. Such stories have been written by L. T. Meade, Grant Allen, and Dr. Conan Doyle. The "Story of the Speckled Band" in *The Adventures of Sherlock Holmes* is one of the best of these. There is also Dr. Watson, the friend of Sherlock Holmes, who has such a convenient practice, and can leave it at a moment's notice for a day or two or a week, as the case may be, in order to go with his friend to some interesting case.

Two capital pictures of the everyday life of a doctor, however, have been written by Dr. Conan Doyle. These are *Round the Red Lamp* and *The Stark-Monro Letters*. The former is a collection of short stories, one of the best of which is "His First Operation." The latter are a series of letters from a man who has just set up his plate in a large town in the north, and describe his early struggles, his delight when the first patients arrive, and his dismay when he finds that they are too poor to pay him any fee; he even has to give them medicine for nothing.

We must not forget the famous scene described by Ouida, in which a doctor rushed up to the hero of the story and, placing his hand upon the femoral artery, exclaimed, "He lives!"

A different class of doctor again, who undoubtedly only exists in fiction, is the character present in the minds of newspaper reporters. The varieties of this strange genus are legion, and I must leave them, merely quoting one of his latest vagaries. A man had cut his throat, and the reporter was assured by the surgeon in attendance that he "had cut all the arteries of his jugular vein!"

The above few selections will, I think, show that the doctor is, at any rate at the present day, a not unimportant character in fiction. As to what his place in fiction will be in the future, who can tell? Perhaps even one day he will not appear except as an extinct type—a sort of human dodo, which disappeared about the end of the twenty—th century. *Absit omen!*

The Office of Warden.

The Mid-Sessional Address, delivered before the Abernethian Society, January 11th, 1900,

By Dr. JAMES CALVERT.



R. PRESIDENT AND GENTLEMEN,—When your Hon. Secretary, Mr. Niall, asked me to give the Mid-Sessional Address, I at first instinctively begged to be excused, pleading—and I am sure you will agree that the plea was a reasonable one—that my many duties at St. Bartholomew's Hospital made me afraid of undertaking any extra work whatsoever. But presently, sensible of the honour you had done me, a member of the Abernethian since my Prelim. Scientific days, and afterwards its President, I put aside my fears, accepted gratefully, and looked about forthwith for a suitable subject—a subject not purely scientific, but of more general interest, seeing that on these occasions we are honoured by the presence of those who, although unfortunately they cannot be members of the Abernethian Society, are not allowed to grow fond of the place—as some of you are—by sitting round the fountain, yet form an essential and important part of our Medical School: just as proud of belonging to St. Bartholomew's as we are, and every bit as prone as we are to let their friends and acquaintances at other hospitals know it.

Well, last year Mr. Berry, as Surgical Registrar, chose for his address the subject of "Dressers and Dressing," and, as Medical Registrar, I might have chosen "Clerks and Clerking;" but the merry clerk is very much the same as the merry dresser, and evidently Mr. Berry had exhausted the subject, so that I turned my thoughts to another of my functions.

I remembered that I was Lecturer on *Materia Medica*, Pharmacology, etc. Now *materia medica* and pharmacology is, as you know, a soul-inspiring subject, especially pharmacology, at nine o'clock on Saturday mornings in the summer-time. I thought the changes introduced into the new British Pharmacopœia might form the basis of a useful discourse; but on reflection I came to the conclusion that it would be too wildly exciting, and might injuriously affect the nerves of my hearers, and might even compel them, against their will, to creep out at the top there when I was not looking. So that at last I turned to the office of Warden; and being by this time in somewhat mournful mood, "The Sorrows of the Warden" seemed to me an attractive title.

It seemed like the title of a really good tearful, sobbing sort of novel; and yet the title appeared somewhat familiar. And then I remembered, and in my mind's eye I saw the notice-board in the hall, on which was announced that I would give the Mid-Sessional Address on "The Sorrows of the Warden;" but some wag had altered the last word, and it read "The Sorrows of Satan." I gave the title up: it was too dangerous, for there may be a few people about this place who think that the Warden and the other gentleman are practically identical. So finally I chose the wider title, "The Office of Warden," and now I will proceed to tell you something about it.

On June 1st, 1842, the medical officers wrote a letter to the Treasurer and Almoners. The letter was signed by C. Hue, G. L. Roupell, George Burrows, Wm. Lawrence, and Edward Stanley. No doubt there were other medical officers, but in these times assistant physicians and assistant surgeons were of no account; they considered themselves lucky if, when they passed through the Hospital gates, the porter did not stop them to ask their names.

The letter urged "that a collegiate establishment would render St. Bartholomew's Hospital a much more efficient institution for medical education, and would also be productive of great benefit to society at large."

The Treasurer and Almoners took the greatest interest in the proposal, and after consultation with Mr. Paget—"a gentleman whose long connection with the Medical School enabled him to furnish very important information"—they recommended to the House Committee "that six houses in Duke Street should be appropriated to the purpose; that they should be very neatly and plainly fitted up at the expense of the Hospital; and that the present doors in Duke Street should be entirely closed."

To what purpose these houses had been put before this time I cannot tell you; it is said they were the residences of the Hospital porters. But Mr. Cross assures me that they were never used for this purpose. However, there they are in all their ancient grandeur.

In January, 1843, the House Committee elected the first Collegiate

Committee. The Collegiate Committee exists to this day. Eight gentlemen were appointed, one of whom was Peter Mere Latham. The Collegiate Committee at their first meeting resolved—

(1) That the rooms on the first floor be fitted up in a superior manner to the others.

(2) That the building shall be called the St. Bartholomew's Collegiate Chambers.

(3) That an officer be appointed to take charge of the chambers and the diet, and that he be called the Manciple.

(4) That a superior officer be appointed to have the general charge of the discipline of the establishment, and that he be called the Warden.

The next step was to fix the price of the rooms and food; and in order to give the authorities some guidance in the matter, Mr. Ormerod and Mr. Paget drew up an exhaustive report on the expenses of medical students living in lodgings, arranged under the heads of (1) rooms, (2) coals, (3) attendance, (4) food.

In this report they say—and I am sure you will be glad to know it,—that "nearly all the students lunch in some way or other, the great mass at the neighbouring bakers, and the remainder at the public-houses. This meal consists with the majority of biscuits or bread in some form, with pastry; whilst those who go to the public-houses resort there more for beer than food."

They made many recommendations for use in the collegiate establishment, but they especially utter this warning: "The addition of beer is of very questionable propriety, and is liable to very great abuse." What a side-light on the medical students of that day, or rather on some of them!

On August 10th, 1843, Mr. James Paget, Lecturer on Physiology, was appointed Warden—"a gentleman eminently qualified for the appointment."

In the following October, at the beginning of the Winter Session, the Collegiate Establishment was opened by the Warden and sixteen students, and after a certain interval the Collegiate Committee ended their very full account to the House Committee by reporting that "they have not considered it expedient to make daily attendance at the church imperative on the students, but they are gratified in being able to state that many of the pupils have been constant in their attendance." I wish we could say the same to-day. I mention this minute because it shows very clearly what a broad view of the situation was taken by the Collegiate Committee and the Warden, how sincerely anxious they were to ensure, in so far as they could, the welfare of the students.

The Collegiate Establishment under Mr. Paget proved a great success; it was always full, and was presently enlarged.

At first every six months, and later once a year, the Warden made a report to the authorities. He always reported at great length, evidently because the Governors had made an experiment, and it was necessary to show them that their experiment was a complete success. And I can easily imagine how great an impression his reports must have made; they are written in very beautiful language, and they are an eloquent index to the great character of the man who wrote them, and I trust that whoever may write the life of Sir James Paget will first read through the Collegiate Committee's minute-books.

Nowadays the Warden's report to the Collegiate Committee is a very matter-of-fact affair, and covers perhaps a sheet of note-paper, but no one nowadays doubts the usefulness of the College.

From these reports I have made two extracts which I thought might interest you. The first one was written in May, 1845, that is when Mr. Paget had been Warden for a little more than eighteen months, and it is as follows:—"Though the collegiate system cannot make all pupils industrious, it is of great avail in preventing the idle from becoming dissolute." In the second one, written after five years' experience in his office, he says "the College should not be regarded as a place for reforming those who are disposed to be idle. It is excellently suited for industrious students, and for those who are inclined to follow good examples, but I can only see reason to regret that under the pressure of solicitations from friends and parents any others have ever been admitted."

The first extract scarcely appeals to us in these days; we are not afraid of our students becoming dissolute, either in College or elsewhere. But with this second extract I am in complete accord; it is as true to-day as it was in Mr. Paget's time. The College is not the place to lodge a student hopelessly idle; there is always the danger that he will find some other to help him in doing nothing. Isolation, preferably in the house of one of the teaching staff, is the condition in which he will flourish, if there be any chance at all of his flourishing.

so far, then, I have attempted to give you some idea why and by whom the College was started.

Mr. Paget remained its Warden until October, 1851. He was eight years in office,—years full of hard labour, as those of a pioneer must always be, and full, I am afraid, of disagreeable incidents, for the men of that time were not as they are now, and the Warden suffered many things. And yet they were very happy years, sustained as he was by the sympathy of the best of the students, and by the certain knowledge that he was doing great work for the School. And we must all feel glad that he lived long enough to see how great a change has been wrought in the student of medicine, and to know that at least some part of it was due to his own prolonged endeavour.

The next Warden was Dr. Black. Mr. Savory, afterwards Sir Wm. Savory, applied for the post—at the time he was tutor to the first year's men—but he was ineligible because the Warden must be either a lecturer or a demonstrator in the medical school.

After Dr. Black came Dr. Martin, who was already Assistant Physician to the Hospital. Smithfield Market was not a dead meat market in those days, and it is said that one of Dr. Martin's great troubles was the frequency with which the cattle driven along Duke Street thrust their horns through his dining-room windows.

Then came Dr. Andrew. It was he who suggested that "if the students in College had a pecuniary interest in the preservation of the furniture it would strengthen the financial position of the establishment." I think you will agree that it was very nicely put, and caution-money was in future imposed. No doubt the imposition was necessary, and it is only by little side-lights of this kind that we can judge of any wild doings in the College. The minutes of the Collegiate Committee give no indication of disturbances, the Warden's reports always insisting that the conduct of the majority of the students was most exemplary, whilst they are discreetly silent about the conduct of the minority.

After Dr. Andrew came Mr. Willett, and after him Mr. Morratt Baker.

When Mr. Baker resigned he was distinguished by quite an original vote of thanks from the authorities. His predecessors seemed to have been peculiarly alike, because they were all thanked for having displayed exactly the same virtues in exactly the same manner under exactly the same circumstances. It was a little worrying until I discovered that Mr. Cross had in the meantime come on as Clerk to the Hospital, and that instead of turning up the last vote of thanks, as his predecessor evidently had always done, he actually drafted a new and original one of his own.

Dr. Norman Moore succeeded Mr. Baker; then came Dr. Shore, and then I came. You see I have made no attempt to give you a history of the work of the various Wardens; it would be unbecoming of me to do so, because some of them are still among us. And I dare say you would like to know what my experience of the College has been. Well, of course I need scarcely tell you that the conduct of the majority of the students has been most exemplary; and as to the conduct of the minority, it is occasionally playful, nothing further. It occasionally ties itself up in a knot on the floor of somebody's room in the College, and it does not do this altogether in silence—delightful to watch on the football field, but undesirable in so cramped a place; innocent enough, yet wholly to be discouraged, were it only for the sake of those senior men who have learnt how serious a thing is the study of medicine, men who are perhaps within a month of their final examination, and naturally resent a disturbance which prevents their steady pursuit of a success which in the majority of cases is of the most serious importance.

The fact that the Warden may have to drag out of bed, to hold low and tender converse with these youngsters, is of course a minor consideration, and one not in the least likely to influence the view of any equal-minded Warden,—that the College is a place for work, and that disturbance, however innocent, must be prevented.

However, if the superintendence of the College were the Warden's only duty his post would not be a heavy one, but he has also upon his shoulders the care of the whole of the Medical School. Indeed, it would be impossible for me to enumerate all the functions the Warden is called upon to perform. It would be easier for me to tell you what he has *not* to do.

One of his chief duties of course, and by far his most pleasant one, is to receive as the representative of the Medical School the new men when they first arrive at the Hospital; to act as their guide, philosopher, and friend, so far as he can; and to wish most sincerely that he could do much more for them. He cannot pass their examinations for them, though without doubt, if such things could be done by proxy, the duty would surely fall on the Warden. Thus he gets to know every student, and this of course is very nice for the

Warden, though it may not be always equally agreeable to the student.

There are about 600 students attending the Hospital, and each one of these may any day want something, or think he wants something; or he may perhaps feel lonely, and therefore he comes to see the Warden; and very glad the Warden is to see him, or to answer his letters if he prefers to write. But at times it may become a little trying. Just to give you one example: there is a sweet and thoughtless sort of person who, preferably on Saturday nights, loves to wander about the place until 8 or 9 or 10 o'clock, and then finds he has left his hat in the cloak room, and hastens to ask the Warden if he will be so kind as to open the School, to open the cloak room, and to hunt about for what the Warden on one occasion with inexcusable sarcasm and want of originality called—not a hat, but "the covering of what you are pleased to call your head."

Then each of these 600 men may have a father or a mother, or sisters, brothers, cousins, aunts, etc., who take an interest in his welfare, and they may call singly or in small armies to inquire about him; and again the Warden is very pleased to see them—an excellent training for him, it enlarges his sympathies.

These interviews with relatives are not entirely free from danger, because the Warden, like the rest of the world, may make a mistake. About three months ago a gentleman arrived to make inquiries about a student whose people lived in Australia. He gave me the student's name, and by some curious mental obliquity I saw in my mind the wrong man, and I gave him the character of the wrong man, and it was rather a bad one. The gentleman went away much grieved and without leaving his address, and before he had been out of the house five minutes I saw the mistake I had made and was powerless to correct. The Australian post went out that night, and with it a letter carrying dismay to a far distant home. The only thing to be done was to get hold of the student involved, and tell him what had happened. Well, he laughed, and seemed to think that it was rather funny. Anyhow he was very nice about it, and undertook to write without fail by the next mail, so that I hope no great harm was done. Sometimes even tailors and things call, anxious to know the private address of some student; but these last interviews cannot be said to take up much of the Warden's time, they are so very short.

Then you will remember that the Calendar directs that all communications concerning the Medical School should be addressed to the Warden. This is an invitation of which the world at large takes liberal advantage, not only in matters medical, but on any other subject in which they may happen at the time to be interested. So that the Warden stands to be shot at on any subject, from the entrance of a student to the question recently asked as to whether cheese is really a suitable article of diet for a child three weeks old.

Curiously enough, the Warden never receives letters begging for money; perhaps this is due to the fact that previous Wardens have always maintained a very firm attitude in this respect.

I will presume upon your patience for a short time in order to read you a few samples of the letters received by the Warden during the last few months.

"DEAR SIR,—Having read in the *British Medical Journal* of 27th August, 1898, page 559, under heading 'Degrees for Practitioners,' that registered medical practitioners of not less than three years' standing and not less than twenty-five years of age who shall pass or have already passed the matriculation and preliminary scientific examinations could proceed to the intermediate and M.B. examinations, without the intervals, etc., I shall thank you to let me know whether my case satisfies the above requirements.

"I am a Licentiate of the Ceylon Medical College, and have served under Ceylon Government in the capacity of a medical officer for fully six years. My age is twenty-nine years. Before registration I passed the Cambridge Junior Local Examination held in Ceylon in December, 1886, in religious knowledge, English, mathematics, Latin, and Greek, at one and the same time. I have not passed the London matriculation. If I reach London next February, 1899, will I be able to prepare for the London matriculation and the preliminary scientific at the same time in your College, and appear for them in June and July respectively? Is it possible? Granting I pass in both, will there be any special classes to coach me up for the intermediate examination to be held in January, 1900, and for the final examination to be held in October of the same year? Are there special classes held for the above examinations every six months? What are the fees for the lectures on each of the subjects or for the special classes for the above examinations, including practical work in the laboratories and dissections?

"What are the fees for hospital practice? Will I be eligible to

all the appointments open to the students, and how many such appointments, salaried or not, are there available in your hospital? In the selection of students for the appointments, will any preference be shown to me in consideration that I am already a registered medical practitioner; or will I be shut off from the competitive examinations where such are held for the appointments?

"Is there a boarding attached to your College, and what are the fees charged? If none, what cheapest arrangements could be made for me, and what will it cost me for a month?"

"Please send me all the necessary information, with the syllabus in each subject for the above examinations and for the London matriculation to be held in June next. What are the text-books recommended for each subject?"

"Please take my special case into consideration, and let me know whether I could obtain all facilities to get through M.B., B.S. (Lond.) within the least possible time, say two to two and a half years.—I am, sir, yours, etc."

"DEAR SIR,—I am writing to inform you that one of your students, Mr. A—, has ordered from me an Amalgamated Clubs' jacket, which has been duly made according to his correct measurements. He called to-day and tried the coat on, and, after a deal of controversy, was unreasonable enough to assert that the sleeves were fully one inch too short for him.

"He at the same time agreed that the coat he was wearing was a good fit. Upon measuring the sleeves of this coat I proved to him that the sleeves of my coat were an inch and three quarters longer than his, but he still insists upon the fact that my sleeves are one inch too short. I suggested to him that had he acquainted me with the fact that he wanted sleeves to reach his knuckles, such as night-shirt sleeves, he should have stated so at the time of ordering; not to have been so unreasonable as to throw the coat on my hands for unnecessary alteration at the last moment.

"No doubt he will communicate the affair to you, and I shall be glad if you will put the matter before an independent person and have the matter thoroughly thrashed out.

"I consider Mr. A— most unreasonable, and at the same time very unbusinesslike.—I am, sir, yours, etc."

"To the Warden, St. Bartholomew's Hospital."

"'The Rest' (!), C— Road, S—.

"DEAR SIR,—We have had a young fellow passing by the name of V. C. H—, as a student of your institution; light hair and eyebrows, fair, but tanned, and representing that he is the son of a physician, Dr. H—, of Harley Street, W., whose name, however, I fail to find in the Medical List. He has been staying with us some few days, and has decamped with several articles of value. He is of stout build, and about five feet eight inches in height. He professes to have been through your medical department, and now for the last six months in the surgical. He is, or at least says he is, of American extraction, and is now in training (during his two months' vacation from your hospital) for a road race from Rouen to Paris and back, which race he has already won for two years in succession.

"I should very much like a line from you as to whether such an individual has ever been within your walls. I enclose a stamped envelope, and apologise for troubling you, but I know for the honour of your institute and the profession you will do the best you can in the matter for me.—Yours, etc."

"P.S.—The young fellow is clean-shaved, says he has made the eyes a special study; and I find his name should be C. V. H—, aged twenty-three or twenty-four."

"'The Homestead' (!), S— Road, B—.

"TO PRINCIPAL,—Dear Sir or Madam, a young man came here a week ago to-day Saturday and took 2 rooms 1 sitting room 1 Bed-room for 6 weeks at 35 shillings per week inclusive, and said another student from there were coming on Saturday for a Month and he would share the double bedded room with him and pay the same as himself, Friday he hired a Ladies bicycle for the day and in the evening he gave it to Mrs. James of the Fox in Terrace Rd. and he was locked up for it Friday night I waited for him until 10 minutes past 12 o'clock and Saturday morning a policeman fetched the young Gents bicycle and he is remanded till Monday the 21st and he will not give his name or address, the name he gave me was Mr. C. V. H—, Doctor H— son Harley Street, London, will you kindly see and tell me if his statements are true. am sorry if I am giving you so much trouble, but you will greatly Oblige yours truly.

"P.S. he has not any money so could not pay me."

"TO THE WARDEN OF THE COLLEGE ST. BARTHOLOMEW'S,—Miss J. C— will be much obliged if he will send her a handbook of the hospital.

"September 2nd."

"TO THE WARDEN OF THE COLLEGE,—Miss J. C— begs to thank Dr. Calvert for his kind letter and the handbook which she has just received.

"She is afraid she has made a mistake in applying to him for the prospectus and rules, as it is not as a 'student' but for Nurses' training that she desired information.

"She is sorry to have troubled Dr. Calvert unnecessarily.

"September 5th."

"DEAR SIR,—I am told that you are sometimes in want of guinea-pigs (at the Hospital). I have some I wish to dispose of, and shall be glad if you could take some from me. I would sell them for a small sum each.—I am, yours truly,

"July 26th.

"MAY R—.

"The guinea-pigs are in perfect health."

The Warden is the person chiefly responsible for the discipline of the School; he is a prominent member of the most popular Committee in the Hospital, the Discipline Committee, a committee which is certainly no exception to the majority of committees in this respect, the seldomer it meets and the less work it has to do the better it is pleased.

The Warden is one of the Treasurers of the Amalgamated Clubs; the other is Mr. Bowlby, who, as you know, has left his country for his country's good, and he stands in somewhat similar relation to the Abernethian Society, although of course the Abernethian Society has a Treasurer of its own as well. When I came up to the Hospital the subscription to the Abernethian was optional, and it depended largely on the energies of the secretaries and additional committeemen how many people were induced to join.

At that time the great day for the Abernethians was the day appointed for the election of officers—and the Society was blest with an organised and very healthy opposition, who used to put up candidates for all the offices against those nominated by the government. For days before there used to be great canvassing and much excitement, which culminated of course at a very crowded meeting held always in the evening, and not, as at present, preceded by a ballot during the day; so that if a man wished to vote he had to come down and be actually present.

Well, I joined the Abernethian simply and solely to be present at this meeting, and a very enjoyable evening we had.

A past House Physician was in the chair. The room was packed. The minutes were read and approved without comment; every one was anxious to get on to the real business of the evening. And, perhaps because they were so anxious to get on, a simple, but essential ceremony, was overlooked by the President. He omitted to say—"If there are any gentlemen present who have not been admitted members of the Society, I will be pleased to admit them now." And then follows, as you know, "In the name of," etc.—you shake hands with the President, and you are then, and not until then, legally a member.

Well, this, as I say, was omitted, and we proceeded to the election of a President; the Government nominee and the opposition nominee were duly proposed and seconded in speeches detailing at length their respective merits. They were both present, and heard their praises sung with all fitting modesty. And after much discussion we proceeded to vote, and our new President was elected. Thereupon a supporter of the unsuccessful candidate got up and addressed the chair. He presumed that all the gentlemen who had voted had been duly admitted as members.

The Chair was sure that no one who had not been formally admitted would have voted. Upon which I rose and explained how sorry I was, that I did not know any better, that I had not been formally admitted, but that I had certainly voted; and so said many others. Then a supporter of the newly elected President got up, and said he thought it was a poor thing to try to upset his man by a mere technical quibble. Then some one on the other side asked was it legal or was it not? he for his part took his stand on the law, it was the only safe thing to do. Then most people began to talk all at once, the Chair got flurried, gave a very decidedly wrong ruling, and there we were with all the elements of a very enjoyable evening. You must not think there was any row in the usual sense of the word. On the contrary, we were all sticklers for the correct conduct of the debate, and therefore the evening was very instructive as well as amusing, and I hold that one of the chief uses of the Society should

always be to accustom men to speak, and to give them a good idea of the rules to be observed in the conduct of meetings.

Well, of course all this was an excellent advertisement for the Abernethian; it stimulated interest in its proceedings, and therefore brought in subscriptions, so that the opposition was a very good thing, and so long as an opposition is healthy and honest it is a good thing.

Again, when I was President I remember a deputation came to us and invited us to give a conversazione with Buszard cakes—even as the preceding administration had done. We replied that the funds of the Society would not justify us in doing so, whereupon they summoned an extraordinary meeting of the Society, to censure us and to compel us to give a conversazione with Buszard cakes. Here, again, the room was packed, and the opposition pointed out that the preceding administration had handed over to us a balance of £13 odd, and that if we could not afford to give a conversazione it must be that we had been lazy and indifferent, and that in consequence the subscriptions had fallen off, and that the Society was evidently in a bad way. But we were ready for them; we proved that our predecessors had submitted to the auditors a very naïve balance-sheet on this principle—they paid their debts until they had £13 odd left of their year's income, then they handed over the balance to us, but forgot entirely to mention that some £70 or £80 of their debts were still owing. We had to pay this £70 or £80, and we came to the meeting armed with the receipts. So there were no Buszard cakes that year.

Well, gentlemen, it seems to me that I have wandered away from my subject into stories about the Abernethian Society. It is now ten minutes past nine, and I know that coffee was ordered for a quarter to nine, so for the rest I will tell you only this one thing about the office of Warden: its demands on my time are so numerous, and often so unexpected, that there has been little time for me to think about the matter, much less to write about it; but you remember what Shakespeare says, "There is nothing either good or bad, but thinking makes it so."

If you will out of your charity think very hard that I have said all that ought to have been said, some of you may perhaps be persuaded that my address has been what I wish I could have made it—worthy of my very large audience.

Two Cases of Enteric Fever with Unusual Complications.

By JOHN CURRIE, M.D.

SIDNEY B—, æt. 8, a healthy, well-nourished boy, came home from school on January 24th complaining of not feeling well; he was not feverish, and had no diarrhoea, but was suffering from pain in the abdomen.

January 26th.—Pain in abdomen continued; he vomited once, and he was a little feverish.

27th.—He was seen professionally for the first time. He complained of pain, referred to the umbilical region. Temperature was raised (101°), the tongue was furred; there were no spots; the spleen was not palpable; there was no abdominal tenderness, and there was no diarrhoea. He had slight cough, but there were no physical signs in the chest. It was thought that his symptoms were perhaps due to the presence of ascariides in the intestine, and santonin gr. ij, with Hyd. ã Cret. gr. iij, was prescribed.

29th.—Five large worms were passed; patient vomited once; the general symptoms remained unchanged.

31st.—Patient again passed five worms.

February 2nd.—Three worms were passed. The general condition remained unchanged. Two doubtful spots were noticed on this day. A specimen of blood was taken and sent to the Pathological Laboratory at St. Bartholomew's, and Widal's reaction was immediately obtained.

7th.—The morning temperature was normal. There was no pain; the tongue was still furred, and there was still a little cough.

22nd.—Temperature was normal, and the tongue clean.

25th.—Patient was convalescent.

This patient lived in a cottage next to, but detached from, one in which there had been three fatal cases of enteric fever last November; the excreta had, I believe, been thrown on to a manure heap which

had overflowed the wall dividing the two gardens. The attack of fever was so mild in my patient, that had it not been for the occurrence of it next door, it might have been easily overlooked, and the whole of the symptoms ascribed to the presence of ascariides.

Oliver P—, æt. 30, a collier, lodging in a cottage in which there had been three cases of enteric fever with one death.

December 21st.—He was seen professionally, and said he had been working up to December 19th, although he had not been well for some days, but had been unable to work since. On the 21st he was suffering from diarrhoea; his tongue was furred, and his temperature 102°. No enlargement of the spleen was noticed, and there were no spots on this date, although they appeared afterwards. There was no cough. He was probably in the second week of the disease. The disease ran a mild typical course until January 5th, when the temperature, which had been 100° on the previous visit, was found to be 103° 5', and the patient then drew attention to his left testicle. It was swollen to the size of a hen's egg, very painful and tender; there was no enlargement of the epididymis or cord. There was not at this time any urethral discharge, and the patient denied having had any. An ointment of belladonna was prescribed for local application, and the condition gradually subsided, until by January 17th the patient was convalescent.

Orchitis is one of the rarer complications of enteric fever; Osler, in the last edition of his book, states that Sadrain has collected sixteen cases from the literature, but does not state that he has himself met with the complication; he also says that it is usually accompanied by a catarrhal urethritis, which was absent in my case.

Notes.

THE Bradshaw Lecture before the Royal College of Physicians will be delivered this year by Dr. A. E. Garrod.

* * *

MR. W. LANGDON BROWN has been appointed Assistant Physician to the Metropolitan Hospital.

* * *

MR. P. LEGG has been appointed Senior Surgical Registrar and Surgical Tutor to King's College Hospital and Medical School.

* * *

CAPT. F. O. KINEALY sends us the following:—The Third Annual Dinner of the Bart.'s men in Bengal was held at the United Service Club, Calcutta, on the evening of Thursday, December 21st, 1899, and was more largely attended than either of the previous ones. The following were present:—T. H. Hendley (1865) in the Chair, G. Ranking (1874), J. Neild Cook (1876), E. C. Pettifer and F. P. Maynard (1880), J. Lloyd Jones (1881), F. O'Kinealy and R. Bird (1883), H. J. Walton and A. D. Humphry (1886), E. A. R. Newman (1888), and W. D. Hayward (1893). The toast of the evening was proposed by the chairman, who referred with much regret to the absence of H. W. Pilgrim and B. C. Oldham, both of whom had been present at the last dinner, but were unfortunately prevented from attending on this occasion by illness contracted in the course of their duties. It was to be hoped that they would both be seen fully restored to health at the next dinner. In the course of his remarks he noted with great satisfaction the increasing number of Bart.'s men who year by year choose India as the

field of their labours, and trusted that they would continue to do so, as he felt sure that their work was appreciated, and that they would prove themselves to be second to none in the profession. The *Alma Mater* was drunk with much enthusiasm, and many Bart.'s yarns were spun before the meeting broke up.

* * *

We extract the following from the *Daily Chronicle* of a recent date: "At University College Hospital, and probably at other hospitals, a mysterious set of initials is used when a case arrives which defies the first hurried diagnosis. It is entered in the patients' book as G.O.K., which signifies that only the Maker of the man knows what is the matter with him."

* * *

"L'ENVOI."

(With apologies directed to the proper quarter.)

When the last exam. is accomplished, and the register fee
has been paid,
And the ghost of the last examiner has once and for ever
been laid,
We shall rest, and faith we shall need it; just slack for a
fortnight or two,
Till the pangs of gastrodynia shall force us to work anew.

And they that want work, they shall get it, they shall work
by night and by day;
Then send in accounts for "attendance," but they'll have to
wait long for their pay;
They'll diagnose just as they fancy, with disease and disaster
they'll cope,
But they'll learn that the office of doctor is Charity, Faith,
and Hope.

* * *

THE advertisements of the London Temperance Hospital contain a sentence which is somewhat difficult of interpretation. After stating that every case in which alcohol is prescribed is exceptional, and is made the subject of a distinct report, we read that "the number of such cases from the commencement has been *under thirty-one*."

* * *

We cull the following choice paragraphs from our contemporary, the *Westminster Hospital Gazette*:

We wonder who the probationer is who lately danced into Henry Hoare with the remark, "Good-night all! I've got to do some washing to-morrow, and I've never washed on Sunday before." "I did think 'ow as she 'ad been brought up as a laidy," remarked one of the patients. . . .

It would be deemed a favour if those nurses carrying sausages upstairs would keep a close watch on them and also muzzle the cheese, as it is absolutely dangerous allowing it to wander about promiscuous like.

* * *

Our contemporary once referred to our columns as 'eminently respectable' and "Times-like." On the whole, and after careful consideration, we cannot say we regret the

choice we have made, if the other alternative is the one adopted by *The Broadway*. We have often had occasion to commend the fitness of our contemporary's title, and some recent utterances, which we cannot reproduce here without risking a likeness to *The Pink 'un* rather than the *Times*, quite bear out our commendation.

* * *

READERS' tastes differ, and editors must change, but a small minority that would fain see their Hospital Gazette become a poor imitation of the front page of the sporting paper above mentioned will probably last for ever. For our JOURNAL we confess to having had a loftier ambition, and on vacating the editorial chair this month it is with the confident hope that the only change will be a more successful realisation of our aim for its next occupant.

Amalgamated Clubs.

RUGBY FOOTBALL CLUB.

SEASON 1899-1900. FIRST XV.

Matches played, 20. Won, 7; Lost, 12; Drawn, 1.
Points for, 107; Points against, 162.

Although not many matches have been won, the season has nevertheless been fairly successful. Our defeats of the R.M.A., Old Leysians (1st match), and especially Portsmouth, were very creditable. We were only beaten by 1 try by Bedford and O.M.Ts., and we drew with Harlequins. The other clubs that went down before us were Park House, R.N.C., Upper Clapton, and Streatham. In the Cup Ties we deserved to be nearer the Final, though fairly beaten by Guy's. Next year should see us with any luck in the Final at least. H. C. Adams, this year's captain, will unfortunately be out of his year next season; all the other members of the team will, however, be available.

ST. BART.'S "A" v. KENSINGTON "A."

Played at Winchmore Hill, Saturday, January 13th, and after a fast and even game on a frost-bound ground ended in a win for the Hospital by 1 goal to *nil*. The try was scored by Carroll after a good run. Team:

St. Bart.'s.—N. M. Wilson (back); C. Dix, G. D. Drury, J. Carben, N. Conolly (three-quarters); F. R. Carroll, T. O'Neill (halves); F. Harvey (captain); H. E. Stanger-Leathes, W. H. Scott, G. Pinker, N. Maclaren, K. S. Wise, H. M. Huggins, H. V. Wenham (forwards).

ST. BART.'S "A" v. ST. MARY'S HOSPITAL "A."

Played at Acton on Wednesday, January 17th. A very one-sided game resulted in a win for Bart.'s by 4 goals and 8 tries (44 points) to *nil*. Team:

St. Bart.'s.—E. S. Marshall (back); C. Dix, G. D. Drury, B. N. Ash, G. G. Ellett (three-quarters); F. R. Carroll, D. M. Stone (halves); F. Harvey (captain); H. E. Stanger-Leathes, E. C. Hodgson, N. Conolly, W. H. Scott, J. M. Plews, W. H. Hamilton (forwards).

ST. BART.'S "A" v. ILFORD WANDERERS.

Played at Winchmore Hill on Saturday, January 20th. The visitors brought a very strong team down, and consequently the Hospital had to acknowledge defeat by 3 tries to *nil*. The ground was in a terribly wet condition, and the play was confined almost entirely to the forwards. Team:

St. Bart.'s.—C. L. Nedwill (back); H. E. Stanger-Leathes, C. Dix, N. M. Wilson, G. Pinker (three-quarters); F. R. Carroll, D. M. Stone (halves); M. B. Scott, E. G. Milsom, L. Arnould, J. A.

West, T. B. Davies, N. Maclaren, H. M. Huggins, H. V. Wenham (forwards).

ST. BART.'S "A" v. GUY'S "A."

Played at Honor Oak on Wednesday, January 24th, and resulted in a win for Bart.'s by 2 goals 4 tries to 1 goal 2 tries. The first half of the game was very evenly contested. Bart.'s scored first, then Guy's scored 2 tries in quick succession, half-time arriving with Guy's 2 tries, Bart.'s 1 try. Soon after half-time Guy's scored a goal; after this Bart.'s pressed for the rest of the time, and scored 2 goals (one penalty) and 3 tries, leaving them winners as stated above. For St. Bart.'s Carroll played well, scoring 3 of the tries. Team:

St. Bart.'s.—C. L. Nedwill (back); C. Dix, E. G. Drury, G. G. Ellett, T. O'Neill (three quarters); F. R. Carroll, D. M. Stone (halves); F. Harvey (capt.), L. R. Tosswill, H. E. Stanger-Leathes, M. B. Scott, T. Bates, K. S. Wise, E. C. Hodgson, A. N. Other (forwards).

ST. BART.'S "A" v. MERCHANT TAYLORS' SCHOOL.

On Wednesday, February 7th, was scratched on account of frost.

ST. BART.'S "A" v. OLD CHARLTONIANS.

On Saturday, February 10th, was scratched on account of frost.

ST. BART.'S "A" v. HARLEQUINS "A."

On Saturday, February 17th, was scratched, the ground at Winchmere Hill being unfit for play.

RESULTS OF MATCHES FOR THE SEASON.

Played, 19. Won, 12; lost, 5; drawn, 2; points for, 260; points against, 60.

ASSOCIATION FOOTBALL CLUB.

The season 1899-1900, if we exclude the terrible fiasco in the semi-final of the Hospital Cup Ties against London, has been fairly successful. We have had a most unfortunate succession of losses, which deprived us of four of our best players, and the team, which at the beginning of the season promised to be a really good one, ended by being distinctly below our usual standard. A. H. Bostock owing to an injured knee was never able to play for us; then F. S. Lister, who had been chosen to play for Middlesex, also injured his knee early in the season, and has not played since. H. E. Thomas has not been available, and H. W. Masterman was called to the front after the second round of the cup ties. In the Hospital Cup Ties, after beating Middlesex somewhat easily by 4 goals to 1, we played Guy's in a snowstorm, and defeated them by a goal to nil. Then came our defeat by London by 9 goals to nil. Excuses for such an overwhelming defeat are useless; nobody played up to form, and we played like a beaten team from the start.

In ordinary matches the result is distinctly good,—11 games won, 3 lost, and five drawn. The only teams that beat us were Cheshunt (twice) and Ewell. The goal average is 50 goals to 36. This average is far below that of last season, the chief reason being that the quality of our defence has been persistently better than the forwards. The weak points in the team have been in the half-back line. Orton, who has captained the team since Bostock resigned, has played an energetic and strong game throughout. The bulk of the forward work has fallen on Ward and O'Brien, who, although neither scored as many goals as last year, have played consistently well.

HOSPITAL CUP TIE.—SECOND ROUND.

ST. BART.'S v. GUY'S.

Played at Old Deer Park, Richmond, and resulted in a win for Bart.'s by 2 goals to 1.

This tie was played in weather of the most wretched description, as sleet and snow fell during the whole of the game, which was witnessed by only a small company of spectators, there being about thirty-five Bart.'s men and twenty London men.

Bart.'s started against the wind, and soon gave evidence of superior combination. About a quarter of an hour after the start a corner was forced after a good run down by the right wing. Miller put in a good corner, and Berryman, taking on the full pitch, notched a clever goal. We continued to have the better of the exchanges, and should have scored two or three times, O'Brien twice shooting wild and high. Just before half-time Barber, after a short dribble, shot a clever goal right through the backs.

After half-time Bart.'s, playing with the wind, became more

dangerous; and the forwards, well backed up by the halves, made several fast runs. Ward once shot through from an excellent centre of Berryman's, but was ruled off-side. O'Brien gained our second point after getting away by himself. The backs played a very good game, especially in the first half when against a strong wind. Masterman, who had come up from Wales especially to play, played an excellent game. The combination among the forwards was good, but the shooting was weak. Team:

St. Bart.'s.—J. P. Griffin (goal); L. Orton, T. H. Fowler (backs); G. W. Miller, H. W. Masterman, W. S. Neale (halves); T. A. Killby, R. C. Berryman, C. O'Brien, V. G. Ward, H. N. Marratt (forwards).

SEMI-FINAL.

ST. BART.'S v. LONDON.

Played at Ealing on February 22nd, and resulted in a victory for London by 9 to 0.

London kicked off, and for the first ten minutes the game was fairly even; but London soon got together, and their forwards, led by G. P. Wilson, combined admirably and kept the ball in our half almost continuously. Bart.'s were unlucky in losing Fowler, who strained his leg in the first few minutes, and was obliged to leave the field after twenty minutes' play. London rapidly commenced to put on goals. Hutchinson scored the first from a good pass by Wilson, and Fletcher headed the second from a corner. Griffin saved a hot shot from G. P. W., but the latter soon got away by himself and scored. Before half-time Hutchinson again scored with a good shot. Marratt and Ward then broke away and forced a corner, from which Bart.'s were unlucky in not scoring.

On restarting London continued to attack, and, except for occasional breaks away by the Bart.'s forwards, they kept the ball in the Bart.'s half. Wilson put on two more goals, Hutchinson and Gogens one each, and Jacob, from a long shot from half, further increased the score.

London surprised their own supporters by the game they played. Their forwards, led by G. P. Wilson, played well together, and were well fed by their halves. For Bart.'s Orton played a great game at back. Griffin saved some hot shots, but although the ground was against him he did not clear well. Miller was the best of the halves, while the forwards found the opposing backs and halves too strong for them.

We were very unfortunate in not being able to get Masterman or Thomas, and also losing Fowler after the first few minutes, which necessitated playing four forwards. Team:

St. Bart.'s.—J. P. Griffin (goal); L. Orton, T. H. Fowler (backs); G. W. Miller, F. E. Taylor, W. S. Neale (halves); T. A. Killby, R. C. Berryman, C. O'Brien, V. G. Ward, H. N. Marratt (forwards).

HOCKEY CLUB.

ST. BART.'S v. HERTS COUNTY.

Played at Winchmere Hill on Saturday, March 10th, and resulted in a win for the Hospital by 1 goal to nil. At the start the game was very even, but the Hospital soon started the attack. Although shooting several times they were unable to score. The backs of both sides cleared well.

In the second half the game was very fair, but neither side scored till within a quarter of an hour before time, when Beckett scored for the Hospital. The County backs played a sound game. Glennie for the Hospital was in excellent form. Team:

St. Bart.'s.—L. Dickson (goal); E. T. Glennie, L. Furber (backs); A. H. Pollock, W. E. Fowler, M. O. Boyd (halves); A. Hallows, G. V. Bull, F. H. Beckett, H. Gray, R. C. Wilmot (forwards).

SWIMMING CLUB.

At a meeting of the Swimming Club held on March 6th the following officers were elected:

President.—Howard Marsh, Esq., F.R.C.S.

Vice-Presidents.—W. P. Herringham, Esq., M.D., L. Thorne-Thorne, Esq., M.D., P. Furnival, Esq., F.R.C.S., Fay Bennett, Esq., M.R.C.S., L.R.C.P.

Captain.—Mr. L. B. Scott.

Secretary.—Mr. A. H. Bloxsome.

Committee.—Messrs. L. B. Scott, A. H. Bloxsome, E. M. Niall, A. M. Amsler, M. G. Winder, C. Dix, V. J. Duigan, W. H. G. Thorne, D. M. Stone.

RIFLE CLUB.

The annual general meeting of the Club was held on Thursday, December 8th, 1899, when the officers for 1900 were elected:

President.—H. J. Waring, Esq.

Vice-Presidents.—Howard Marsh, Esq., Dr. Edkins, E. W. Miles, Esq., W. R. Read, Esq.

Captain.—R. J. Morris.

Secretary.—Norman Maclaren.

Committee.—C. R. V. Brown, E. F. Travers, C. F. Feilding.

The following matches have been arranged:

Wed., May 16	...	Silver Spoon Competition	...	Runemede.
" " 23	...	Dulwich College	...	"
" " 30	...	Silver Spoon Competition	...	"
" June 6	...	Royal Indian Engineering Col.	...	"
" " 13	...	Inter-Hospital Match	...	"
Mon., " 18	...	Whitgift Grammar School	...	Woldingham.
Wed., " 27	...	Silver Spoon Competition	...	Runemede.
" July 4	...	Rifle Club Prize Meeting	...	"
Thurs., " 12	...	Inter-Hospital Challenge Cup	...	Bisley.

The regulations for the Silver Spoon Competitions will be the same as last year.

Correspondence.

To the Editor of the 'St. Bartholomew's Hospital Journal.'

"PERNICIOUS ANÆMIA."

SIR,—In the recent volume of *St. Bart's Hospital Reports* I see an interesting account of a curious condition of colitis found at the post-mortem of a case of pernicious anæmia (see p. 299). I attended a patient, female, aged 44 at death, who had all the clinical signs of pernicious anæmia. For several years she frequently passed masses of gelatinous and fibrinous-looking mucus, strongly suggestive of some form of colitis. I sent some of this material to the laboratory of this Hospital, and the report was, it might come from a case of malignant disease of the bowel, but there was nothing very definite to make out. I had specially asked to have it searched for evidence of *Anchylostoma duodenale*, the reply being in the negative. Now this case lasted long enough to quite remove the suspicion of there being any malignant disease. Twice the patient rallied so as to place in doubt the diagnosis of pernicious anæmia, but eventually the anæmia and enlarged spleen with other classical signs proved the truth of the diagnosis. The patient died of colliquative diarrhœa in Scotland, and although I telegraphed to have a post-mortem, unfortunately it was refused. The changes in the blood-cells under the microscope were very marked, and yet improved when the last rally occurred under forced feeding with chopped underdone beef, port wine, red marrow extract, and Liq. Sodii Arseniatis. Even the spleen could scarcely be felt during this rally. In the early stages of this case the symptoms pointed to an undoubted gastric ulcer, but when bismuth and morphia were administered the constipation with anæmia increased to an alarming extent. Also when iodoform in any form or hæmoglobin was administered the lemon-tinted anæmia with sickness and headache would be more marked. Castor oil in dram doses, alternated with simple warm water enemas, gave the greatest relief to the aspect and feelings of the patient.

In certain books the condition of the bowels is said to be a consequence of the disease, but after watching this patient I felt convinced there is some association between a diseased large bowel having something to say to the production of an animal poison, which by its absorption destroys the blood and produces the entity called pernicious anæmia. I tried to get the relationship of the organic to the inorganic sulphates of the urine made out, but the Clinical Research Association failed to carry out the research. In any case this patient's urine did not yield the usual excess of pigments seen in pernicious anæmia. In private practice so few cases of this disease are met with, that it is impossible to make useful comparisons. My chief object in writing is to direct the attention of those attending the post-mortem room to make further observation on the condition of the intestinal tract in all cases of pernicious anæmia, as, in spite of the great researches by Dr. Hunter on this disease, its cause is still unknown.

Yours truly,

J. KINGSTON BARTON, M.R.C.P.

March, 1900.

Appointments.

BROOK, CHARLES, M.R.C.S., appointed Consulting Surgeon to the Lincoln County Hospital.

BROOK, W. H. B., F.R.C.S., M.D., B.S.Lond., appointed Surgeon to the Lincoln County Hospital, *vice* Charles Brook, appointed Consulting Surgeon.

BROOK, W. H. B., F.R.C.S., M.D., B.S.Lond., appointed Coroner for the Lincoln North District, *vice* Dr. George Mitchinson, deceased.

RANDOLPH, W. H., M.R.C.S., L.R.C.P., appointed House Surgeon to the Gravesend Hospital.

LEGG, T. P., F.R.C.S., M.B.Lond., appointed Senior Surgical Registrar and Tutor at King's College Hospital.

DRUITT, A. E., M.R.C.S., L.R.C.P., D.P.H., appointed House Surgeon to the Torbay Hospital, Torquay.

CORNISH, C. V., M.R.C.S., L.R.C.P., appointed House Surgeon to Out-patients at the Hospital for Children, Great Ormond Street.

SEWELL, E. P., M.B., B.C.Cantab., nomination to R.A.M.C.

ADAMS, P. E., M.D.Lond., M.R.C.S., L.R.C.P., appointed Civil Medical Officer to the South African Field Force.

EVANS, LAMING, M.B., B.C.Cantab., F.R.C.S., appointed one of the Surgeons to the Welsh Hospital for South Africa.

JONES, T. C. LITLER, M.R.C.S., L.R.C.P., appointed Civil Medical Officer to the South African Field Force.

New Addresses.

EMERY, W. D'ESTE, Esq., Rosslynn, School Road, Moseley, Birmingham.

HOLST, OTTO, Esq., from 26 to 20 Upperton Gardens, Eastbourne.

OLDFIELD, JOSIAH, Esq., from 122 to 30, Harley Street, W.

STAWELL, R. DE S., Esq., from 22, Margaret Street, W., to St. Mary's Court, Shrewsbury.

Birth.

BEST.—On March 18th, at The Firs, Waltham Cross, Herts, the wife of F. H. de Graves Best, M.R.C.S., L.R.C.P., of a son.

Marriage.

JONES—BURMAN.—On February 16th, at St. Matthew's Church, Upper Clapton, by the Rev. J. Cullin, M.A., William Black Jones, M.D., B.S.Lond., of Llangammarch Wells, Breconshire, eldest son of the late Rev. William Mead Jones, D.D., to Elizabeth Ada, third daughter of William Kimin Burman, of Clapton, N.E.